

- MC site of Pseudoaneurysm – Vascular Anastomosis
- Earliest sign acoustic neuroma – loss of corneal reflex (cranial nerve 5)
- MC hepatitis to progress to **chronicity – hepatitis C**
- MC virus associated with **transfusion hepatitis – HCV**
- MC hepatitis associated with hepatocellular carcinoma – HBV and HCV
- MC hepatitis virus causes perinatal transmission – HBV
- MC sporadic hepatitis cases occur adult – HEV
- **MC cause of hepatitis cases in children – HAV**
- MC cause of portal hypertension in USA – Cirrhosis
- Second most common cause of portal hypertension in USA – Portal vein obstruction
- MC cause of BUDDCHIARI syndrome – polycythemia vera
- MC symptom of portal hypertension – GI bleeding
- MC presenting feature of esophageal varices – hematemesis
- MC cause of BUDDCHARI syndrome in Japan – idiopathic obstruction of IVC
- **MC symptom 1st degree biliary cirrhosis – Pruritis**
- MC feature of hepatocellular carcinoma – abdominal pain + abdominal mass
- Rare in HCC – jaundice
- Most specific tumor marker of HCC – alpha fetoprotein
- MC cause of nephrotic syndrome in adult – MGN
- MC cause of nephrotic syndrome in children – MCD / lipoidnephrosis
- MC GN associated with HIV – focal segmental GN
- MC GN world wide – Ig A nephropathy
- MC renal lesion associated with HCV-MPGN - 1
- MC presentation of Ig-A nephropathy-hematuria
- **CRF in leprosy MC –MPGN**
- MC other infection –MGN
- MC hereditary nephritis –alport syn
- MC extra renal site of cyst in APKD –liver
- MC age of presentation of PCKD- 3rd or 4th decade
- MC histological variant of renal cell carcinoma- clear cell carcinoma (non papillary)
- MC aneurism – atherosclerosis
- MC site of aneurism – abdominal aorta
- **Shyphilis MC affect – arch of aorta**
- MC layer affected – tunica media
- MC type of vasculitis – temporal arteritis (Giant cell arteritis)
- MC infection – PAN (Due to HBV)
- MC used artificial vascular graft - DACRON
- Most common site in Atherosclerosis – abd. aorta
- MC site of fatty stroke – thoracic aorta
- MC coronary vessel arteritis - LAD
- MC type of MI – anterior wall MI
- MC cause of restrictive cardiomyopathy - amyloid
- MC tumor in heart – secondary
- MC primary tumor in heart – arterial myxoma
- MC cause of microcytic hypochromic anaemia in India – Iron deficiency anaemia
- MC cause of cell injury – hypoxia > Ischemia
- Most sensitive cell to hypoxia – cerebral cortex > neurone > myocardial cell
- First organelle affected by hypoxia – mitochondria
- First change in cell injury – hydropic swelling
- MC type of necrosis – coagulative necrosis
- Only organ where coagulative necrosis occurs – brain
- **Stimulator of apoptosis – p53**
- Greatest % of blood present in – vein
- Maximum surface area – capillaries
- **Maximum resistance – arterioles**
- Mode of spread of Aids in India – Heterosexual
- Mode of vertical transmission of Aids in India – Infective birth canal
- Mode of transmission of aids in paediatrics patients - Vertical transmission
- MC type of HIV in India – HIV 1 subtype C
- MC bacteria infected in AIDS – TB
- **MC fungal infection in AIDS – Candida**
- MC cause of dementia in AIDS – AIDS related dementia
- MC carcinoma in AIDS – Kaposi sarcoma
- First disorder corrected in Gene therapy – SCID
- **MC organ affected in amyloidosis – kidney**
- MC cause of death in amyloidosis – heart disease
- MC carcinoma in oral cavity – Bucco alveolar complex
- MC oral cancer – squamous cell carcinoma
- **Carcinoma tongue MC site – lateral middle 1/3**
- Carcinoma oral cavity best prognosis – carcinoma lip
- **MC site of peptic ulcer diseases – first part of duodenum**
- Second most common site of PUD – anteropyloric junction
- Third most site of PUD – lesser curvature of antrum and pylorus
- MC site of carcinoma stomach – esophago gastric junction and cardia
- Maximum conc. of H. pylori – antrum
- MC complication of PUD – Bleeding
- MC cause of death in PUD – Perforation
- Second MC site of gastric carcinoma – anteropyloric junction
- MC gastric carcinoma – adeno carcinoma (histological type)
- MC gastric carcinoma – intestinal type (antrum and pyloric)
- MC benign tumor in small intestine – adenoma (Ileum)
- MC malignant tumor in small intestine – adeno carcinoma (deodeno jejunal junction)
- MC site of carcinoid in body – bronchus
- MC site of carcinoid in intestine – ileum
- **MC hormone release in carcinoid – 5 HT**
- MC symptom of carcinoid – flushing and diarrhea
- MC type of intestinal polyp – Hyperplastic polyp

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- MC site colorectal carcinoma – rectum and sigmoid
- MC effected by metastasis form of colorectal carcinoma – Liver
- MC cause of mental retardation – Down syndrome
- **MC cause of mental retardation in male – fragile x syndrome**
- MC cause of restrictive cardiomyopathy – Amyloidosis
- MC cause of hepatitis in India – HEV
- MC type of gall stone – Mixed
- MC mode of HBV – Heterosexual
- MC cause of fulminant hepatic failure in pregnant women – HEV
- **MC cause of HCV infection – blood transfusion**
- MC cause of chr. hepatitis – HCV
- MC complication of HOCM - CHF
- MC congenital cardiac lesion - VSD
- MC defect in VSD membranous part of septum
- ASD – defect in ostium secundum
- MC cause of myocarditis – coxsackie B virus
- MC cause of type 1 DM – coxsackie B virus
- Most potent vasoconstrictor – angiotensin 2
- MC cause of MCC sudden death due to heart disease – Ventricular fibrillation
- First enzyme rise in MI – Myoglobin
- First enzyme to diagnosed in MI – CKMB
- **Most important enzyme diagnosed MI – Troponin I**
- Most involved blood vessels in MI - LAD
- Most dangerous blood vessels involved in MI - RCA
- MC arrhythmic complication of MI – ventricular tachycardia
- MC valve effected in rheumatic fever – mitral valve
- MC rheumatic heart disease lesion – MR (MC callum's plaque)
- MC chr. RHD – MS (Button hole / fish mouth stenosis)
- MC cause of acute infective endocarditis – staph aureus
- MC cause of subacute infective endocarditis – strep. viridans
- **MC cause endocarditis with prosthetic valve – staph epidermidis**
- **MC cause of endocarditis in IV drug abuser – staph aureus**
- MC valve involve by staph aureus – tricuspid valve
- MC root of spread of HDV- parenteral
- MC cause of buddchiari syndrome – polycythemia Vera
- MC heart disease with increase severity in pregnancy – RHD with MS
- MC type of porphyria – porphyria cutanea tarda
- MC involve joint in osteo arthritis – knee joint
- Fetal third degree heart block in SLE – Rho. ab
- MC infection agent in STORCHA – CMV
- MC type of leprosy in India – Neuritic type
- MC complication of measles – SSPE
- MC complication of Chicken pox-Secondary skin infection
- MC complication of diptaheria –myocarditis
- MC complication of pertussis- bronchiectasis
- MC complication of pericondritis o pinna – pseudomonas
- **MC complication of fungal otitis externa – aspergillus niger**
- **MC cause of malignant otitis externa – Pseudomonas**
- MC cause of furunculosis – staph aureus
- MC cause of mestoiditis – β Haemolytic streph
- Most important sign of furunculosis – tragal sign (positive)
- MC complication of mestoiditis – post aural retro auricular abscess
- MC cause of ASOM – Pneumococcus
- MC site of natural perforation of tympanic membrane in ASOM – anterior inferior quadrant
- **MC site on tympanic membrane where myringotomy done – posterior inferior quadrant**
- MC cause of hearing loss in child – Glue ear
- MC cause of CSOM – Mixed infection > Pseudomonas
- MC site of cholesteatoma – prussack's space (attic)
- MC intracranial complication of COSM – temporal lobe abscess
- MC ossicle get damaged – incus
- MC labrynthine fistula – lateral semicircular canal
- MC Facial nerve palsy – bell's palsy (idiopathic)
- MC fracture of temporal bone – facial nerve damaged – transverse fracture
- MC iatrogenic cause of facial nerve pulsy – ear surgery (mastoid surgery)
- MC complication of myringotomy – permanent perforation
- MC graft tissue for tympanic membrane perforation – temporalis fascia
- MC symptom of glomustumor – pulsatile trinitus
- MC site of otosclerosis – fistula behind tympanic membrane
- MC cause of BPPV – trauma
- MC cause of vertigo – vestibular neuritis / idiopathic vertigo
- **MC nerve involve in acoustic neuroma – superior vestibular nerve (Cranial nerve 8)**
- MC site of acustic neuroma – cerebro pontine angle
- 2 nd MC RCC –papillary carcinoma
- only cataract cause Ac.loss of vision-snow flake
- MCC of drug induced cataract-steroid
- MCC Of ocular complication post transplant-cataract
- **MCtype of cataract surgery in India-ECCE**
- Hardest cataract-cataract nigra
- **MC site of heat stroke-basal ganglia**
- MC type of incontinence-stress incontinence
- MC dysphagia caused by stroke-conduction dysphagia
- MCC charcot joint India-leprosy
- MCC charcoot joint in world-DM
- MCC parkinsonism-drug induced
- MC drug in parkinsonism-typical antipsychotic

- MCC of equine gait-leprosy
- MCC of high steppage gait-DM nephropathy
- MCC of waddling gait-duschenne muscular dystrophy
- MCsite of rupture berry aneurysm-ant cerebral art
- least common site of berry aneurysm rupture-vertebral art
- MC type of stroke-embolic stroke
- MCsite of haemorrhagic stroke-putamen
- MCC of calcification of brain-neurocysticercosis
- MCC of extradural bleeding-mid meningeal art
- MCC of subdural bleeding-cortical bridging vein
- MCintestinal site of hemangioma in peutz-jejunum
- MC site of perforation in gastric ulcer-lesser sac
- MCsite of perforation in duodenal ulcer-ant gastric sac
- MC site of ZES-2nd part of duodenum
- MCC of hematemesis-PUD
- MC of osmotic diarrhea in babies-rotavirus
- MCC of portal HTN- non cirrhotic portal fibrosis
- MCC of melanoma-PUD
- MCC of haematochezia(FRESH BLOOD IN STOOL)-diverticulitis
- occult blood in stool-CA caecum
- Earliest joint inv in ankylosis spondylitis-sacroiliac joint
- Least joint inv in ankylosis spondylitis-cervical spine
- MC sign VIT - A def -bitot's spot
- Danger area of the eye-ciliary body
- Danger area of face-filtrum
- **MC cause of steatorrhea-1. giardiasis ,2. chr.pancreatitis**
- **MC site to absorption of----**
 - a. **folic acid-duodenum>jejunum**
 - b. **iron-duodenum**
 - c. **bile acid-ileum**
 - d. **vit-b 12-terminal ileum**
 - e. **calcium-duodenum**
- MC cause pseudomembranous colitis - clindamycin
- MC type of fistula in CD - Colocolic
- MC site of ulcerative colitis - rectum
- **MC site of carcinoma esophagus - lower 1/3**
- MC site of chrons disease - ileum
- MC occult blood in babies stool - hookworm
- MC site of sq. cell carcinoma of esophagus - middle 1/3
- MC type of esophageal carcinoma in India - sq. cell carcinoma
- MC type of esophageal carcinoma in world - adenocarcinoma
- MC cause of adenoma carcinoma of esophagus - barret's esophagus
- MC sq. cell carcinoma of esophagus - achalasia-cardia (alcohol, smoking)
- Esophageal carcinoma best response to chemotherapy - sq. cell carcinoma
- MC toxicity in cisplatin - ATN (acute tubular necrosis)
- MC cause of cushing ulcer - ↑ icp/intracranial injury
- **MC cause curling ulcer - burn**
- **MC epidemiological tool - H. pylori**
- MC presenting symptom of congenital pyloric stenosis - vomiting (metabolic alkalosis)
- MC used surgery in India for duodenal ulcer - truncal vagotomy + drainage
- MC cause of pernicious anaemia - vitamin B12
- MC affected part of stomach in pernicious anaemia - fundus and body
- MC site of leiomyomas in GIT - Stomach
- MC type of benign tumor of stomach - leiomyomas
- MC hallmark of whipples disease - SI mucosa macrophages
- MC test in small intestine malabsorption - D-xylose absorption test
- Treatment of choice of small intestine malabsorption - endoscopic mucosal biopsy
- **MC CNS manifestation in Whipples disease - Dementia**
- MC cause of persistent symptoms of celiac disease - control intake of gluten
- MC cause of massive bleeding through PR (55 yrs) - diverticulosis
- **MC cause painless maroon coloured stool - diverticulosis**
- MC long term effect of radiation on GIT - telangiectasis
- MC site of polyp in GIT - small intestine
- MC site for Hemorrhagic polyp - small intestine
- MC site for polyp in peutz-jager syndrome - small intestine
- **MC site for polyp in juvenile polyposis - large intestine**
- MC cause of acute loss of vision - acute pancreatitis (purtscher's retinopathy)
- MC cause of complication of pancreas pseudocyst-body and tail of pancreas
- MC presentation of ZES-PUD+ diarrhea
- MC site of PUD in ZES - Duodeno bulb (second part of duodenum)
- MC danger complication of retrobulbar anaesthesia - intrathecal injection of lidocaine
- MC intra operative complication of cataract surgery - post capsular rupture
- MC post of complication of cataract surgery - after cataract
- MC form of uveitis - anterior uveitis
- MC cause of anterior uveitis - idiopathic
- Second most common cause of anterior uveitis - ankylosing spondylitis
- MC hallmark of anterior uveitis - cell in anterior chamber
- Second most common hallmark of anterior uveitis - KP's
- MC type of synechiae - posterior synechiae
- MC cause of intermediate uveitis - idiopathic
- MC complain of intermediate uveitis - snows of floater
- MC cause of posterior uveitis - toxoplasmosis
- MC investigation of uveitis - x - ray of sacroiliac joint
- MC time of presenting symptom of sym. ophthalmitis - 2 week to 2 months
- MC finding of sym. ophthalmitis - Dalen fuchs nodule on choroids

- Earliest symptom of sym. ophthalmitis – Photophobia
- MC age group with sym. ophthalmitis – children
- MC type of myopia – axial myopia
- MC type of the squint in myopia – divergent
- MC type of squint in hypermetropes – convergent
- **MC refractive error – astigmatism**
- MC type of cataract in index myopia – nuclear
- MC type of cataract in index hypermetropia – cortical
- **MC cause of epidural hematoma – middle meningeal artery**
- **MC cause of subdural hematoma – bridging vein**
- **MC cause of subarachnoid hemorrhage – rupture berry aneurysm**
- **MC cause of cerebral infarction – middle cerebral artery**
- MC underlying cause of first degree brain parenchymal hemorrhage – HTN
- MC cause of CSF otorrhoea – fracture petrous part of temporal bone
- MC cause of CSF rhinorrhoea – fracture of cribriform plaque
- First manifestation of syringomyelia – Dissociative anaesthesia
- MC cause mononeuritic multiplex – leprosy
- MC cause of extradural compression – trauma
- MC cause of intradural + extramedullary compression – extradural abscess
- MC cause of intradural + intramedullary compression – meningioma
- Earliest manifestation of extradural compression – motor symptom
- **MC cause of neuropathy – Vit. B12 deficiency**
- MC cause of myelopathy – Genetic
- MC cause of death in Duchenne's muscular dystrophy – recurrent pneumonia
- MC cause of paraneoplastic syndrome – Lambert-Eaton syndrome (Oat cell carcinoma)
- MC malignant tumor of parotid – adenoid cystic tumor
- MC cause of conducting hearing loss in India – CSOM
- MC posterior fossa tumor in babies – cerebellar astrocytoma
- MC primary brain tumor in adults – glioma
- **MC benign tumor in brain in adult – meningioma**
- MC brain tumor with worst prognosis – glioblastoma multiformis
- MC cause secondaries in brain – oat cell carcinoma of lung
- MC primary tumor in paediatrics – astrocytoma
- MC type of seizure – general tonic clonic
- First manifestation of parietal lobe lesion – dyscalculia
- MC important manifestation of temporal lobe lesion – Complex hallucination
- MC important manifestation of frontal lobe lesion – Incontinence
- MC important manifestation of occipital lobe lesion – Visual hallucination
- MC vit. responsible for night blindness – Vit. A
- MC vit. responsible for day blindness – Vit. B12
- Only myopathy with distal weakness – myotonic dystrophy
- Neuromuscular junction → post junctional defect – Myasthenia gravis
- Neuromuscular junction → pre junctional defect – Botulism
- MC gender affected with Myasthenia gravis – Male
- **Maximum score in GCS – 15**
- **Minimum score in GCS – 3**
- **Coma score in GCS – less than 8**
- MC pain sensitive structure in brain – dura mater
- MC cause of jaw claudication – temporal arteries
- MC cause of occipital headache – HTN
- MC type of incontinence in LMN bladder – overflow incontinence
- MC type of incontinence in UMN bladder – urge incontinence
- MC type of pupil in syphilis – Argyll Robertson pupil
- MC type of pupil in MS – Marcus Gunn pupil
- Ankle Jerk in UMN – brisk Ankle Jerk
- Ankle Jerk in LMN absent – Ankle Jerk
- Ankle Jerk in Hypothyroid – Hang up Ankle Jerk
- Earliest manifestation in parkinsonism – Micrographia
- Most debilitating manifestation in parkinsonism – Akinesia
- MC site for respiratory aphasia – dominant parietal lobe
- MC site of respiratory apraxia – non dominant parietal lobe
- MC source of emboli – heart
- causes of Duchenne's definition of dystrophin
- MCC of benign intracranial HTN – VIT-Atotoxicity (pseudo tumor cerebri)
- MCC of Alzheimer's disease – old age dementia
- Lewy bodies – MC seen in idiopathic Parkinson's disease
- MCC flexed dystonic posturing – parkinson's
- MCC of extended dystonic posturing – Steele Richardson syndrome
- (progressive supranuclear gaze palsy)
 - MCC festinating gait – parkinsonism
 - MC site abnormal in parkinsonism – Substantia nigra
 - MC type of tremor in parkinsonism – resting tremor
 - MC used drug – anticholinergic induce dystonia – benzhexol
 - **MC abdominal organ involved in penetrating injury – SI > Liver**
 - **MC abdominal blunt trauma – Spleen > liver > kidney**
 - Explosive caused injury – air-fluid interface
 - MC GIT blunt trauma – proximal jejunum, ileocecal junction
 - MC cause of cardiac tamponade – Neoplastic disease, idiopathic pericarditis, uremia
 - MC cardiac tamponade – Pulsus paradoxus
 - MC cause of hypovolemic shock – trauma – haemorrhage
 - MC cause of hypotension – trauma

- MC organ fracture in lower ribs – Spleen and liver
- MC change during fracture of upper ribs – major vessels
- MC cause of interest cerebral haemorrhage – rupture charcot-bouchard aneurysm
- MC hormones increased in trauma – ACTH, CORTISOL, NE, Epinephrine, ADH (September 2008 MCI)
- MC injury in chest trauma – rib fracture (costochondral junction)
- MC cause of myasthenia gravis – thymoma
- **MC nerve affected in carpal tunnel syndrome – median nerve**
- **MC nerve involve in maralgia parasthetica – lateral cutaneous nerve of thigh**
- MC nerve involve in leprosy – peroneal nerve (lateral aspect of knee)
- MC gender affected with myasthenia gravis – male
- Mononeuropathy due to trauma MC nerve - is ulnar nerve
- **MC early complains in myasthenia gravis – ptosis and diplopia**
- MC individual muscle involve in myasthenia gravis – extra ocular muscle and lid
- Only muscle dystrophy with distal muscle involvement – myotonic dystrophy
- MC hereditary neuromuscular disease – Duchenne
- **MC adult muscular dystrophy – myotonic dystrophy**
- MC part of the body affected in Burger disease – lower limb
- MC type of vessels affected in Burger disease – small and medium size
- MC vessel affected in Burger disease – digital vessels
- MC risk factor in Burger disease – smoking
- Type of vasculitis in Burger disease – panvasculitis
- MC amputated part in Burger disease – toes
- MC presenting symptom – ascending art. occlusion – pain
- MC gender affecting in Raynaud's disease – female
- MC body part affected in Raynaud's disease – upper limb (finger and thumb)
- **MC site of diabetic ulcer – Heel > metatarsal head**
- MC involve layer in pseudo aneurysm – intima and media
- MC cause bilateral thigh and buttock claudication – aorto iliac occlusive disease
- MC cause of pulseless disease – Takayasu disease
- MC cause arch of aorta disease – Takayasu disease
- **MC involve vessels in Takayasu disease – subclavian artery**
- MC gender affected in Takayasu disease – young female
- MC location of Takayasu disease in world – Japan
- MC location of mycotic aneurysm – femoral artery
- MC pathogenic organism in mycotic aneurysm – staph > salmonella
- MC used synthetic vessel graft – Dacron
- MC used non synthetic vessels graft – PTFE
- MC cell neointimal hyperplasia – smooth muscle
- MC cause of peripheral limb ischemia in India – atherosclerosis
- MC invol vessels in hypersensitivity angitis-post capillary venule
- MC region affected in hypersensitivity angitis-small vessel of skin
- MC vessel in carotid aneurysm-superficial . temporal art
- MC antiepileptic-lumphenopathy-phenytoin
- MC gender with migraine-female
- MC gender for cluster headache-male
- MC gender with glaucoma-female
- MCC of headache which awakes from sleep-cluster headache
- MC early sign of increase ICP-alter mental status
- MC late cause of increase ICP-coma
- MC neuroprotective effect in increase ICP-hypothermia
- **MC hematoma in old age-chr.SDH**
- MC nerve damage in middle cranial fossa fracture-CN7
- Nerve supplying orbicularis oculi-CN7
- MCC of UMN lesion of CN7-stroke
- MCC of LMN lesion of CN-pons lesion
- MC tumor associated with neurofibroma-1—optic glioma
- MC tumor associated with NF-2---acoustic neuroma
- Type of motor neuron lesion in pseudo bulbar palsy-UMN
- Type of motor neurone lesion in bulbar palsy-LMN
- Pseudo bulbar palsy-spastic dysarthria
- Bulbar palsy-Flaccid dysarthria
- Type of bulbar palsy-bulbar polio
- Death in bulbar polio – aspiration pneumonia(absent gag reflex)
- Predominant in G B syn-motor
- MCC descending motor paralysis – diphtheria, botulism, polio
- MC feature of botulism-fixed dilated pupil
- **MC malignancy leading to hypercoagulability-Pancreatic ca**
- **Hormone responsible for hypercoagulable state-oestrogen**
- MC source of emboli in DVT-femoral popliteal and iliac vein
- MC site of DVT-calf vein
- MC method to prevent DVT-pneumatic compression devices
- MC grp of drug used to prevent DVT-low mol wt heparin
- short saphenous vein with – Sural nerve
- Long saphenous vein with- saphenous nerve
- MC carcinoma with migratory thrombophlebitis-CA pancreas
- MC contraindication of vascular surgery-DVT
- MC gender with axillary subclavian vein thrombosis-male
- **MC vein affected in superficial thrombophlebitis—Great saphenous vein**
- MCC of superficial thrombophlebitis-I. V infusion

- Earliest sign of DVT- Calf tenderness
- MC gender with berry aneurysm-Female
- MC of cerebral infraction-Middle cerebral art
- M C demyelinating disorder-multiple sclerosis
- MCC of brain tumour-Secondaries
- MCC primary of brain tumour-Gliomas
- MC type of gliomas-astrocytoma
- MC location of astrocytoma-Cerebral hemisphere
- Medulloblastoma occur-Cerebellum
- CARCINOMA never spread to brain- prostate CA
- Cerebellar hamangioma associated-Von Hippel-Lindau disease (Renal cell carcinoma)
- Von Hippel-Lindau disease – haemangioblastoma, cerebellum spinal cord, optic neuritis
- MCC portwine stain (facial nevus)-Sturge Weber synd
- MCC Metastasis to brain-small cell of lung
- Cephalic migraine – aura without headache
- MC presenting feature of craniopharyngealoma – visual disturbance due to lesion in optic chiasma
- MC childhood brain tumor found in – posterior fossa (Cerebellum)
- MC adult brain tumor found in – cerebral hemisphere (above tentorium)
- HSV1 and 2 affect mainly – brain HSV1 – oral, HSV2 – genital
- Leptomeninges – pia + arachnoid matter
- MC type of cell in CSF in TB meningitis – lymphocyte
- Normal CSF glucose – $\frac{2}{3}$ of plasma glucose
- Exudate in TB meningitis – through duramater spread (involve leptomeninges)
- MC area affected in TB meningitis – Basal cisterna
- Calcification in TB meningitis – meninges – base of brain
- MC cause subdural empyema in adult – streptococcus
- MC cause subdural empyema in children – H. influenza
- Second most common cause subdural empyema in adult – staph
- HSV2 – aseptic meningitis, HSV1 – encephalitis
- MC cause of sporadic viral encephalitis – HSV1
- MC cause epidemic viral meningitis – arbovirus
- MC cause of viral meningitis – enterovirus
- Sp. to HSV1 encephalitis – focal sign (seizure)
- Other viral encephalitis – without focal sign
- MC parasitic infection in non-immuno suppressed – neurocysticercosis
- MC manifestation of neurocysticercosis – seizures
- Cyst of neurocysticercosis MC – CNS > subcutaneous tissue
- MC site of neurocysticercosis in brain – parenchyma > intraventricular > subarachnoid > spinal > orbital
- MC brain manifestation CMV – meningoencephalitis + retinitis
- MC cause of dementia – Alzheimer's disease
- MC prion disease in human Creutzfeldt-Jacob disease
- CJDs – dementia + myoclonus
- MC spinal cord lesion in syringomyelia-lower cervical + upper thoracic
- Earliest sign in syringomyelia – inability to differentiate hot and cold sensation at inner side of arm
- Hallmark of syringomyelia – dissociative amnesia
- VIT-B12 defn-
 - a. Cerebrum – dementia
 - b. Spinal cord – SACS
 - c. CN – Optic neuritis / atrophy
 - d. Peripheral nerve – peripheral neuropathy
- SACS starts with posterior column (cervical and upper thoracic) – lateral Column corticospinal tract
- MC cause both UMN and LMN lesion – amyotrophic lateral sclerosis
- MC neurodisorder with erectile dysfunction
 - a. spinal cord injury
 - b. M.S.
 - c. Peripheral neuropathy
- MC cause of death in septic shock – cardiac
- MC function in management of shock – adequate organ perfusion
- Best parameter assesses the fluid intake – urine output
- MC complaint of hypermetropes-asthenopia
- Type of vision in astigmatism-telioscoping
- MC age onset of presbyopia-40–45 yr
- Early presbyopes-Hypermetropes
- Late presbyopes – myopes
- Retinoscope shadow moves in same direction-hypermetropes and emmetropes
- Retinoscope shadow moves opposite direction- > 1D myopes
- Far point – Myopes – in front of the eye
Emmetropes – Infinity
Hypermetropes – Vertical part
- Cong. glaucoma MC in AKA – Buphthalmos
- Cong. glaucoma MC present with- Photophobia, blepharospasm
- MC gender with ACG-Female
- MC type in female of ACG-Old, hypermetropes, emotionally unstable
- MC pathological sign of ACG-Mid dilated pupil
- Most presentation of ACG-Ac. painful eye
- MC time of presentation of ACG-7-8 PM
- MCC of acute eye pain in cinema hall-ACG
- MCC of OAG-Trabecular fibrosis
- Type of vision in OAG-Tunnel vision
- MCC Glaucoma in Indians-Low tension glaucoma
- MCC glaucoma in Eskimos-CAG
- MCC glaucoma in African and American-OAG
- Only provocative test for OAG-Water drinking test
- MC provocative test for ACG-Myotic madriatic test
- In glaucoma, earliest field vision lost-Nasal
- In glaucoma, last field of vision lost-temporal
- normal cup disc ratio-0.3–0.6
- Normal large cup disc ratio-Myopes
- Cup disc ratio is -1=Blindness

- Cup disc ratio between 2 eyes in glaucoma- >0.2
- Cup disc ratio 0.8-0.9=Bayonetting
- MC type of glaucoma in world-OAG
- MC type of glaucoma in India-OAG=ACG
- MCC of lacunar stroke-lipohyalinosis
- MC risk factor of stroke-HTN & Age
- MC vessel affected in lacunar stroke-Perforator
- Middle cerebral art occlusion-Contra lat hemiplegia+ Hemi sensory loss
- Lenticulostriated art. occlusion-Contra lat hemiplegia+hemisensory loss
- 2nd MC cause of Wallenberg synd-PICA occlusion
- MCC of Wallenberg synd-vertebral art occlusion
- Wallenberg synd.(sensory loss)-ipsilateral face&contra lat body
- Brown sequard synd-ipsilateral motor loss+ipsilateral proprioception+ contra lat pain & temp. loss
- MCC delayed morbidity or death in SAH-Vasospasm
- MC C of intracranial haemorrhage—Intracerebral>SAH>EDH=SDH
- MCC of intracerebral haemorrhage-HTN
- MC site of HTN sive haemorrhage-basal ganglia.>cerebellum>pons
- MC nerve affected intracranial aneurism-CN 3(oculomotor)
- MC nerve involved in increased ICP-CN 6 Abducens
- Hallmark of aneurysmal rupture-Sudden headache without focal sign
- CN3 pulsy-aneurysm-jnt of PCA&ICA
- CN6 pulsy -aneurism-cavernous sinus
- Occipital & post cervical pain-aneurism-PICA,AICA
- Pain in & behind eye-MCA aneurysm
- Lenticulostriated art occlusion-hemiplegia+hemianesthesia
- MCC of pseudotumor cerebri-vit A toxicity
- MCC prosopagnosia-BL infarct of PCA
- In paed T.B mc affected-tonsils
- MC mode of T.B vertical transmission-Transplacental
- MC T.B location in G.I.T-Iliocaecal
- MC art affected art in haemoptosis-bronchial art
- Main cause of MDR T.B-Noncompliance
- Ext. pulm T.BMC in -HIV
- BCG protect -Ext pulm T.B
- Potts spine MC Type-Paraspinal
- MCC Of constrictive pericarditis-ATT with out steroids
- MCC complication of cyclophosphamide-haemorrhagic cystitis
- MC central bronchiectasis-Aspergilloma
- MC site ten.. pneumothorax-needles-2nd ICS & 5th ICS
- MC organ affected amyloidosis-kidney
- MC death in amyloidosis ds -heart
- MCC Addison's ds in India-T.B
- MCC organism of bird flu-H5N1 Virus
- MC used drug in bird flu-oseltamavir
- MC malign. tumour in heart-secondaries
- Fastest clubbing-Lung abscess
- Clubbing in one finger-Sarcoidosis,gout, A-V fistula
- Eosinophilia is not seen- Eosinophilic granuloma
- ECG in P.E-S1 Q3T3
- Most characteristic ECG- Sinus tachycardia
- Type 1 resp .failure-pco2 is normal or decreased
- Type 2 resp failure-pco2 is increased
- Main culprit of asthma-Leucotrienes
- CO2 necrosis -pco2>45 mm hg
- 1st sign in diabetic retinopathy-Microaneurism
- MCC of spontaneous pneumothorax-Subpleural blebs
- MC complication of diphtheria- Myocarditis
- MC foreign bodies in babies-peanut
- MC foreign bodies in adult-Tooth
- Bronchiectasis pus is MC-Lt. lower lobe
- Simple bronchiectasis pus is MC-Lt. lower lobe
- Central bronchiectasis pus is MC-Central lobe
- Bronchiectasis sicca pus is MC in-Upper lobe
- MCC of cor pulmonale-COPD
- MC nosocomial infection-Pneumonia
- MCC lung abscess in I.C.U-anaerobes aspiration
- MCC of transudative pleural effusion-CHF
- MC presentation of bronchial CA-Cough
- MCC of hypercalcaemia-CA lung
- MCC Of hypo calcaemia - Thyroid surgery
- J receptor is seen in -Alveolar capillary jn.
- MCC of lung abscess-Staph aureus
- Major diagnostic criteria of pulsus paradoxus
- MCC of bronchiectasis in children-Pertussis
- MCC of bronchiectasis in children-Cystic fibrosis
- MC CA of lung in India-Sq. cell carcinoma
- MC risk factor of sq. cell ca-Smoking
- MC natural risk factor of sq. cell ca-Radon gas
- MC central location- Sq. cell carcinoma
- MC peripheral in location-Adenocarcinoma
- MC nerve associated with sq. cell ca-C8, T1,2(PANCOATS TUMOUR)
- MCC of cardiac tamponade- secondaries to heart
- 2nd MC manifestation of PIVD-Radiculopathy, myelopathy
- In polio MC affected-Ant. horn cell
- LMN lesion-Hypotonia , Areflexia fasciculation wasting
- UMN lesion-Hypertonia, brisk DTR, rigidity, akinesia, chorea, ataxia, hemiballismus
- Pyramidal lesion-proximal chorea&distal ataxia
- MC movement affected in hemiballismus-Proximal+ distal
- MCC ataxia cerebral pulsy-Karniaterus affected basal ganglia in babies
- MCC of cerebral pulsy-hypoxia
- MCC of expressive dysphasia- Broca's area damage
- MCC of receptive dysphasia-Wernicke's area lesion
- MCC of conductive dysphasia-arcuate fasciculus
- Burst fracture of spinal vertebra-gibbus
- Nucleus of CN3-Edinger Westphal

- Earlier manifestation of neurosyphilis-Gumma
- MC type of pancreatic adenoma-insulinoma
- MCC type of pancreatic adenoma in MEN1-Gastrinoma
- MC manifestation in MEN 1-Hyperparathyroidism
- MCC of Verner Morrison syndrome-Over production of VIP
- MCC of hyper parathyroidism in MEN 1-Parathyroid hyperplasia
- 2nd MC manifestation in MEN 1-Pancreatic islet neoplasm
- 3rd MC manifestation in MEN 1-Pituitary tumour
- MCC pituitary tumour in MEN 1-Prolactinoma
- 2nd MCC pituitary tumour in MEN1-Acromegaly
- MC symptom of pheochromocytoma-Intermittent occipital headache
- 10% rule-Phaeochromocytoma
- Surgery contraindicated in which type of phaeochromocytoma-Malignant tumour
- Cushing's synd-Cushing's (pituitary adenoma)+ectopic ca. lung+adrenal adenoma
- CF of Cushing's synd-Lemon in stick appearance
- MC of Cushing's synd.-Iatrogenic steroid
- MCC of ectopic increase ACTH production-Small cell CA
- MCC of endogenous cause of Cushing's synd-Pituitary adenoma>ectopic(lung CA)
- MC presentation with ectopic ACTH-Hypokalemia, met. alkalosis+hypochloremia
- Cushing's-Increase adrenal androgens-oligomenorrhoea or amenorrhoea
- Dexamethasone test negative-Non pituitary cause of adrenal androgens-oligomenorrhoea or amenorrhoea
- MCC of adrenal insufficiency in India- T.B
- MCC of Addison's in west-Autoimmune
- MCC primary aldosteronism-Conns syndrome, adrenal adenoma
- MCC secondary aldosteronism-Preg. induce HTN
- Different b/w primary and secondary aldosteronism-Secondary edema
- Other causes of Addison's -Meningococemia
- Cardinal feature of Addison's-Weakness
- Addison's associate with-hypercalcaemia
- Major causes of TYPE 1 DM-Autoimmunity
- Major cause of TYPE 2 DM-Hereditary or genetic
- TYPE 1 DM beta cell mass-Decreased
- TYPE 2 DM beta cell mass-Normal or mildly decreased
- HLA s TYPE 1 DM-HLA DR3 DR4
- HLA s TYPE 2 DM- NONE
- Type of coma in TYPE 1 DM-ketoacidotic
- Type of coma in TYPE 2 DM-Non ketotic hyperglycaemia
- Dyslipidaemias- MC in DM-TYPE 2
- Hypoglycaemic unawareness MCC-Autonomic neuropathy
- MC type of ketoacidosis- DM
- DKA every 100 mg increase glucose-3 meq decrease Na
- MC indicator- DM NEPHROPATHY-overtr proteinuria
- MC manifestation of thyrotoxicosis-Sinus tachycardia
- MC gender with amiodarone associated hyperthyroidism-female
- MC form of thyroiditis-Hashimoto
- MCC of DE QUERVAIN'S THYROIDITIS-VIRAL
- MC HPB of DE QUERVAIN THYROIDITIS-Multi nucleated giant cell
- MC type of thyroid carcinoma with amyloid-Medullary carcinoma of thyroid
- MC hormone secreted by pheochromocytoma-NE
- MCC of pheochromocytoma-Adrenal medulla/ sympathetic ganglion
- Adrenal medulla tumour MC Secrete-NE > E
- Sympathetic ganglion secrete-only N. E
- MC manifestation of pheochromocytoma-HTN
- MC symptom of pheochromocytoma- headache
- MCC orthostatic hypotension in pheochromocytoma- Decrease plasma vol
- MC presentation of insulinoma-Whipple's triad
- WHIPPLE'S TRIAD--- Fasting hypoglycaemia +S/s of hypoglycaemia+relief after I.V glucose
- MC site of gastrinoma-DEODENAM
- MC hormone in gastrinoma-Gastrin
- MC part affected in PUD-1st part of duodenum
- MC test for ZES-Secretin injection test
- ZES- BAO>MAO
- MC valve involved in carcinoid synd-Tricuspid
- MC cardiac manifestation in carcinoid synd-TR,PS
- Only area of brain that require insulin for glucose uptake-Hypothalamus
- MCC of vulvovaginitis in DM-Candidiasis
- Only criteria differ b/w TYPE 1 & 2 DM-Blood insulin level
- Type of oedema in DM retinopathy-Macular oedema
- Type of edema in HTN retinopathy-papilloedema
- Papilloedema-Painless
- Papillitis- painful
- MC retrobulbar papillitis-MS
- MCC of burning feet synd-DM neuropathy
- MC nerve inv in diabetic neuropathy-CN 3
- MCC of ascending paralysis-G. B synd
- MCC of death in polio-Diaphragm paralysis
- MC C of pseudoparalysis-Scurvy
- Earliest sign of scurvy-Perifollicular bleeding
- Late manifestation of scurvy-gum bleeding
- MCC of sudden death in DM-Hypoglycaemic unawareness
- MCC death in HOCM-Ischemic ventricular fibrillation
- MC site involved in atherosclerosis-Tunica intima
- Earliest change adolescence in female-Height spurt
- Earliest change in adolescent male-Increase testicular vol>ht>voice change

- MCC of delayed bone age-Hypothyroidism
- Length @ birth-50 cm
- Max growth during life-1 st year
- Doubling of length—4.5 year
- Length after 5 yr--+5 cm /yr
- Length during puberty—6-8 cm /yr
- MC enzyme deficiency in CAH -21 HYDROXYLASE
- MC teratogenic effect of steroid-Cleft lip & palate
- MC cvs manifestation of marfan syndr—M.Vprolapse,MR,AR ,AORTIC DISSOCIATION
- MC suprasellar tumour in bodies-craniopharyngioma
- MCC of death in SOTO SYNDR.-High output cardiac failure
- MCC of death in acromegaly-CA colon
- MC C feature of acromegaly-INCREASE HEEL PAD THICKNESS
- MC carcinoma in female in India-CA of cervix
- MC carcinoma in male in world-breast
- MC carcinoma in female in metro-breast
- MC viral cause carcinoma cervix- HPV 16, 18, 31,33+HSV -2
- MC presentation CA CERVIX-Post coital bleeding
- MC LN inv cancer cervix-obturator
- MC carcinoma of cervix-Sq. cell carcinoma
- MCC of death in carcinoma cervix-Renal failure
- MC site of carcinoma cervix- Squamocolumnar junction
- MC side effect of cryo surgery-Persistence watery discharge
- MC site of original transform zone in new born female-Ectocervix
- MC shape of adeno carcinoma cervix-Barrel shape
- LN inv. in carcinoma cervix-Para-aortic and pelvic
- 2 nd MC carcinoma in female genital tract-endometrial carcinoma
- MCC of endometrial carcinoma due to oestrogen
- MC Presentation of endometrial carcinoma-postmenopausal bleed
- MC type ovarian carcinoma- epithelial ovarian carcinoma
- MC type of ovarian carcinoma in 2 nd decade-germ cell carcinoma
- MC Cof ovarian carcinoma—ovulation
- MC epithelial ovarian tumour-serous cyst adenoma
- MC germ cell ovarian tumour-dysgerminoma
- 2 nd MC germ cell ovarian tumour—yolk sack tumour
- MC germ cell tumour-dermoid cyst
- MCC of frequent change of distant glasses in young keratoconus
- MC of frequent change of distant glasses in adult-cataract
- MC of frequent change of presbyopic glasses-OAG
- MCC of pseudomyopia-pilocarpine
- Only drug increase aqueous outflow—pilocarpine,latanoprost
- Vision @ viz pilocarpine causes retinal detachment>-5D
- Most powerful betablocker in treatment of glaucoma-timolol
- Selective beta blocker used in treatment of glaucoma-betaxolol
- MC side effect of timolol-eye dryness
- MC used alpha agonist used in treatment of glaucoma-epinephrine
- Retinal detachment occurs between – neurosensory and retinopigmentary layer
- no. of retinal layer in macula-4
- Characteristic of retinal detachment-flashes of light
- Classical sign of retinal detachment—grey reflex
- MC type of retinal detachment-regenerative
- MCC of the regenerative retinal detachment-High myopia
- Most obvious sign in regenerative retinal detachment-lattice tear
- Fundal finding in high myopes—post .staphyloma, Foster-Fuchs spot
- MC pathology in exudative retinal detachment-fluid from choroids
- MCC of exudative retinal detachment-malignant melanoma in choroids
- MC orbital tumour in adult-malignant melanoma
- MC orbital tumour in paed-retinoblastoma
- MC pathology of tractional retinal detachment-Traction by vitreous blood vessel on retina
- MCC of tractional retinal detachment-DM and retinopathy of prematurity
- Diabetic capital of the world-India
- MC factor in DM-duration of disease
- Mirror of the retina- kidney
- Most early sign of DM RETINOPATHY-microaneurysm
- Most early kidney sign sign of DM-Microalbuminuria
- MC pathology of D.M.R— basement membrane thickening
- Pathology of hard exudates-lipid and cholesterol
- Pathology of soft exudates-axoplasm debris
- Hallmark of proliferation of DMR-neovascularization
- Type of RD in PDMR-Tractional
- Most dangerous complication of neovascularization—vitreous haemorrhage
- MCC of loss of vision in PDMR- Vitreous haemorrhage>tractional R.D>neovascular glaucoma
- MC vitreous haemorrhage—D.M.R
- MCC of vitreous haemorrhage in young-trauma, eales ds
- Eales ds also known as-Perlephitis of retina
- Pathogenesis of eales ds-Retinal vein inflammation
- MCC of eales ds-T.B
- Side effect of epinephrine in case of treatment in glaucoma-CME
- C/I of ACG-Epinephrine
- S/E of acetazolamide-Tingling of hands and feet
- Safest antiglaucoma drug-Dorzolamide
- Only anti glaucoma diagnosis with neuroprotective function-Brimonidine

- MC S/E of brimonidine –Drowsiness and depression
- Drug C/I CHILDREN WITH GLAUCOMA—brimonidine
- Glaucoma used drug caused tachyphylaxis-Apraclovidine
- Trichomegaly with viz antiglaucomal agent-Latanoprost
- Fastest acting antiglaucoma drug-Mannitol
- Antiglaucomal drug C/I in D.M-Glycerol
- MC primary tumour of bone- multiple myeloma
- MC site of bone lesion in multiple myeloma-vertebral column
- Schiller duval bodies are seen in-Endodermal sinus tumour
- popcorn calcification is pathognomic for-Lung hamartoma
- MCC of death in carcinoma penis is –erosion of femoral blood vessel
- MC site of metastasis of choriocarcinoma –lung
- MC solitary thyroid nodule is –nodular goiter
- Radiation acts on-G2M phase of cell cycle
- MC site for carcinoma of nasopharynx- Fossa of Rosenmüller
- MC cancer seen in work worker-CAethmoid
- MC type of anal canal cancer-Epidermoid carcinoma
- MC site of kaposi sarcoma-GIT
- MC salivary gland tumour-Pleomorphic adenoma
- Largest size of ovarian tumour-mucinous cyst
- MC primary malignant tumour of spleen-angiosarcoma
- MC tumour which gives secondary to penis-Bladder carcinoma
- MC solid tumour associated with myelodysplastic synd—Carcinoma breast
- MC presentation of kaposi sarcoma in AIDS patient-Raised macule
- REINKE CRYSTALS seen in –hilus cell tumour of ovary
- COFFEE BEAN CELL is seen in –breast tumour
- 2nd MC cancer of GIT in India-CA rectum
- FRANZ TUMOUR-papillary cystic of the pancreas
- BAZEX SYNDROME is a distinctive paraneoplastic eruption associated with sq. cell carcinoma of oropharynx, tracheobronchial tree, esophagus
- MC solid tumour of the omentum-metastatic carcinoma
- MC primary malignant tumour of omentum-Leiomyosarcoma & haemangiopericytoma
- MC benign mesenteric mass—chylous or lymphatic cyst
- MC site of mesenteric tumour—Mesentery of ileum
- MC tumour of retroperitoneum-Malignant tumour
- MC benign tumour of retroperitoneum-Lipoma
- MC malignant retroperitoneal tumour-lymphosarcoma
- MC soft tissue swelling in hand-Ganglion
- MC malignancy associated with sweet syndrome-acute nonlymphocytic leukemia
- pseudo kaposi sarcoma-A-V fistula
- MC site of angiosarcoma is –scalp & FACE
- Most imp. D/D of testicular tumour-Haematocele
- chloroma is a tumour of—Haemopoietic cell
- Countryman's lip is other name of –Carcinoma lip
- MC site for superficial erythematous basal cell cancer (body basal) is –trunk
- Scimitar's sign is the pathognomic X-RAY appearance of –Ant. sacral meningocele
- Alpha fetoprotein is not increased in –Pure seminoma
- MC childhood solid tumour other than brain tumour-neuroblastoma & germ cell tumour
- MC tumour of newborn-sacrocoelgeal teratoma
- MC malignancy in newborn----neuroblastoma
- MC intrarenal tumour in newborn-mesoblastic nephroma
- MC malignancy developed as a complication of endometriosis-Adenocarcinoma
- VANISHING TUMOUR is –localised pleural effusion
- Primary thromboembolism is seen in-Choriocarcinoma
- MC hypothalamic tumour caused D.I-Germinoma
- Recurrent fibroid refers to fibrosarcoma arises in-Scar tissue
- HUCHISON FLECKLE is a type of-melanoma
- Malignant hydatid cyst is –infection with E. multilocularis
- MC abdominal mass in neonate-Multicystic kidney
- MC benign bone lesion-non ossifying fibroma
- MC benign bone tumour-Osteochondroma
- MC benign bone tumour of hand-enchondroma
- MC malignant bone tumour- secondaries
- MC primary malignant bone tumour- multiple myeloma
- MC primary malignant tumour of long bone-Osteosarcoma
- MC cancer affecting both male and female of the world-Lung cancer
- MC site of metastatic disease—liver
- MC complication of bleomycin-Pulmonary fibrosis
- MC site of lentiginous malignancy- face
- MC cytogenetic abnormalities associated with adult myeloma dysplastic synd is-5q
- TOC of medullary CA thyroid is – Total thyroidectomy+ modified neck dissection
- Most imp prognostic factor in soft tissue sarcoma is –Histological grade of the tumour
- MC cause of permeative bone destruction involving all bone in a child age-Histiocytosis X
- MC site of osteogenic sarcoma is- Lower end of femur
- TOC in T1N0M0 lesion of vocal cord is-Radiation therapy
- MC benign tumour of spleen is –haemangioma
- TOC of maxillary ca stage 3 –RT +surgery
- Cataract is not in –Retinoblastoma
- PAUD E ORANGE is seen in – carcinoma of breast

- PAUD E ORANGE is due to –lymphatic obstruction
- SNOW ATROM APPEARANCE in USG IS SEEN IS –H. MOLE
- MC site of krukenberg tumour is-stomach
- TOC of desmoid tumour is – Wide excision
- MC site of lump in breast is – Upper & outer quadrant
- 2 nd MC cause of death in developed world- Malignency
- Brunner gland is seen in-deodenum
- Vortex vein invation is seen in-Multiple myoloma
- Sickle cell anaemia is an example of –point mutation
- Drugs are causing gyanecomestia- Cimetidine, testosterone, spiranolactone, cannabis, alcohol, nifidipine
- Amyloid deposited in primary amyloidosis-AL type
- Amyloid deposited in secondary amyloidosis-AA type
- Macrophages in liver- kuffer cell
- macrophages in lung-Alveolar macrophages
- macrophages in connective tissue-Histiocytes
- macrophages in nervous tissue-microglia
- macrophages in bone marrow-macrophages
- macrophages in kidney is-masengial cell
- MC cell seen in broncholitis-Clara cell
- MCC of bronchiolitis –RSV
- Cursche mann s spiral & charcot leyden cryastal is seen in-bronchial asthma
- MC type of emphysema-irregular
- M imp risk factor of emphysema – alpha 1 antitripsin deficiency & smoking
- PERIORTAL NECROSIS is seen –phosphorus poisoning
- MIDZONAL NECROSIS is seen-yellow fever
- Auer rod is seen – AML
- Mid arm circumference is measured by – Sakirs tape
- MCC of VVF in India is –obstructed labour
- MC clinical presentation of genital T. B- Infertility
- MC change in fibroid- Hyaline degeneration
- MC complication of TAH –Bleeding
- MC regime is used inchoriocarcinoma – MAC regime
- MC site of metastasis of choriocarcinoma—lung
- MCC of infertility-Tubalfactor
- MC C Of tubal ds- PID
- MC presentation of treated genital T.B – Ectopic pregnancy
- MC complication of ECV is-fetal distress
- MC fetal complication of forceps application – asphyxia
- MC complication of MTP produce is bleeding – due to incomplete evacuation
- MC type of episiotomy- mediolateral
- MC complication of forceps application – extention of episiotomy
- MC site for ectopic pregnancy- Ampulla
- MC cause of congenital anomaly in baby of diabetic mother – sacralegenesis
- MC congenital anamoly in baby of diabetic mother – neuraltube defect
- MC problem seen in baby born to diabetic mother – hypoglycemia
- MC problem associated in delivery of macrosomia baby – shoulder dystocia
- MC cause of PPH – Uterine atony
- MC type of PPH – primary PPH
- MC maternal complication of twin vaginal delivery – atonic PPH
- MC cause of secondary PPH is – retained placental bits
- MC reason for caesarian hysterectomy – atonic PPH
- MC indication of forcep is – prolong second stage of labour
- MC cancer cervix is squamous cell carcinoma- 95%
- MC cause of death in squamous carcinoma – renal failure (60 %)
- MCnerve affected in # surgical neck of heumerus-Axillary N
- MC nerve affected in# shaft of heumerus-Radial N .
- MC nerve affected in # supracondylar region-Median N.
- # behind the med epicondyle cause-ulnar N. damage
- MC time to # surgical neck-Old age
- MC time to # shaft of heumerus- adult
- MC time to do supracondylar#-child
- MC site of # clavicle—junction between mid 2/3 & lat 1/3
- MCC of death due to cardio vascular ds in India-TG
- MCC of death due to cardio vascular ds in western country-Cholesterol
- MCC of bronchial asthma-dust
- MC dislocation of hip –pos.dislocation
- MCC of complication of # neck of femur- Nonunion
- MCmeniscus inj- Mid. meniscus inj
- MC salter harris inj-Type 2
- MC vascular inj associated with # clavicle-subclavian vessel inj
- The MC # around the elbow in a child - supracondylar #
- MC complication in up. extremity # around forearms-Compartment synd
- MC compartment inv in compartment syn-v0lar compertment
- MCnerve inv in compartment syn—Median nerve
- MC # involved with compartment syn— Supracondylar #
- MC # in old people-Colles #
- MC # or injury of the carpus-through the waist
- MC causative organism-Staph aureus
- MC infection of joint-knee joint
- MC infection of bone-Tibia
- MC deformity in T.B-Flexion
- MCC of death in multiplemyeloma-Renal failure
- .MC site for greenstick # --2 nd 3rd metatarsal
- MC dislocation of elbow-Pos& pos lat dislocation
- MC cause of infection in burn-Pseudomonus ariginosa

- MC cause of keratitis with contact lens- Pseudomonas
- 2 nd MC cause of nosocomial pneumonia- Pseudomonas aeruginosa
- MC cause of gas gangrene- Clostridium welchii
- MC inv in TB- SPINE
- 2ND mc inv in T.B-Hip
- 3 rd MC inv in T.B-Knee
- MC age of start of T.B hip- 1 st 3 decade
- Tuberculous tenosynovitis MC site- Flexor tendon of the hand
- X-ray picture of osteosarcoma- Sun ray appearance & Codman triangle
- X-ray appearance of Ewing sarcoma- Onion peel appearance
- X-ray appearance of osteoclastoma- Soap bubble, new bone formation
- X-ray appearance of chondrosarcoma— Mottled calcification within the tumour
- Commonest bone tumour- Secondary
- Commonest true bone tumour- Osteoid osteoma
- Commonest primary metastatic tumour- Multiple myeloma
- Commonest secondary in bone- Osteosarcoma
- MC benign bone lesion- Fibrous cortical defect
- MC benign bone tumour- Osteochondroma
- True benign bone tumour- Osteoid osteoma
- MC site of ivory osteoma- Skull
- MC affected site of osteoblastoma- Spine & flat bones
- MC affected bone of osteoid osteoma- Femur, tibia
- MC affected site of osteochondroma- Metaphysis
- MCC of shoulder dislocation in newborn— Obstetrical complication due to trauma in breech presentation
- MC joint involve in rheumatoid arthritis in hand- MCP joint
- MC joint involve in primary osteoarthritis- Knee joint
- MC type of basal cell carcinoma – Noduloulcerative
- MC aggressive BCC - Morphea type
- MC period in which malignant melanoma can be cured surgically – radial growth period
- MC fracture associated with fracture calcaneum is – fracture vertebrae
- MC cause of genu valgum in children – Rickets
- MC site of dislocation – L₅-S₁
- MC cause of loss of teeth after 40 yrs – Periodontitis
- MC cause of acute arthritis in sexually active men – Gonococci
- MC cause of CSF rhinorrhoea – fracture of cribriform plate
- MCC of chest wall cold abscess is due to – Involvement of lymph node near neck of rib.
- MC extra skeletal manifestation of fibrous dysplasia – Café-au-lait spots
- MC cranial nerve involved in raised intracranial tension – Sixth
- MC fracture of neck femur to lead avascular necrosis is- Subcapital
- MC site of stress fracture – metatarsals
- MC symptom of osteogenic sarcoma – pain and swelling
- MC benign disease causing bleeding in postmenopausal women – atrophic vaginitis
- MC cause of postmenopausal bleeding – malignancy genital tract
- MCC of death of carcinoma cervix patient – renal failure
- MCC of gross hydramnion – Anencephaly
- MC lesion in placenta is – Infarct
- MCC of pyometra – Senile endometritis
- MC complication of pain pregnancy – PPH
- MCC of acute cervicitis – Chlamydia trachomatis
- MC indication of unification of bicornuate uterus – habitual abortion
- MC mode of spread of infection urine peripheral sepsis – Via vein
- MCC of maternal mortality is – haemorrhage
- MCC of primary dysfunction of uterine bleeding – Anovulatory cycle
- MCC of congenital viral infection is – CMV
- MC mode of spread of CMV during pregnancy – Oro – respiratory route
- MC period in which AIDS transmission in foetus from mother is greatest – Perinatal period
- Least common RCC – chromophobe renal carcinoma
- MC complication of haemodialysis – HTN
- MCC of chr. renal failure- DM nephropathy
- MCC of HTN- essential HTN
- MCC HTN in babies- CGN
- MCC of hematuria – Ig A nephropathy
- MCC of SIADH – head trauma
- MCC of UTI- E. coli
- MCC of renal stone – Ca . oxalate
- MCC Ca oxalate stone – idiopathic hypercalcaemia
- MCC stag horn calculus- proteus infection
- ADPKD cysts not seen in – lung and brain
- MC used tonometer-indentation tonometer
- MC gold standard tonometer- Goldmann applanation tonometer
- MC type of colour blindness- deuteranopia (green)
- rarer type of colour blindness- tritanopia (blue)
- MCC blindness in the world- cataract
- MCC blindness in India – cataract
- 2 nd MCC of blindness in world- glaucoma
- 2 nd MCC of blindness in India- trachoma
- 3 rd MCC of blindness in world- trachoma
- 3 rd MCC of blindness in India- glaucoma
- MC infectious cause of blindness- trachoma
- MCC ocular morbidity- refractive error
- MCC cataract in world – senile cataract
- MCC of senile cataract- UV exposure
- MC type of congenital cataract – zonular
- MC type of developmental cataract- punctate
- MC type of punctate cataract- blue dot (downs syn)